PANHELLENIC ASSOCIATION
The UNIVERSITY *of* OKLAHOMA

AFFILIATE ROSTER ADDITION & GRADE RELEASE FORM

To add an Affiliate/Transfer student to the official chapter roster at anytime during the year. (Only initiated members should be added using this form)

Name: _____ OU ID # _____
First Last

Phone Number: _____ Sorority Organization: _____

Initiating Chapter & University: _____

ACADEMIC AND GRADE RELEASE

I give permission to the University of Oklahoma Student Life and the officers and advisers of the fraternity/sorority I join, to have access to my education records protected by the Family Educational Rights and Privacy Act of 1974 (FERPA) for the purpose of compiling aggregate scholarship rankings, GPAs, and for my fraternity/sorority to use for scholastic programming and membership requirements. This permission is granted during the time I am a student at the University of Oklahoma, and I am associated with my fraternity/sorority as a new member, active member, or transfer/affiliate. I understand that I can revoke this consent in writing at any time by contacting Student Life at fsps@ou.edu.

☐ I understand and agree to the above statements.

OU STUDENT CODE AND UNIVERSITY POLICIES COMPLIANCE STATEMENT

I understand that my actions and conduct as a student at the University of Oklahoma are governed by the *University of Oklahoma Student Code of Responsibilities and Conduct* and University policies; and that any violation may result not only in charges being filed against me, but also against my fraternity/sorority. Moreover, I hereby authorize the release of my student conduct information (including violations and outcomes) contained in my disciplinary record to my (Inter)National Greek-letter organization, chapter president, standards/accountability officer, chapter advisor(s), and the University of Oklahoma Student Affairs for the purpose of awards, recognition, and educational needs. This authorization shall remain effective as long as I am enrolled at the University of Oklahoma and am affiliated with this chapter (unless rescinded by me in writing). I understand that this authorization allows release of FERPA-protected information.

☐ I understand and agree to the above statements.

HAZING POLICY COMPLIANCE STATEMENT

As a new member or member of a fraternity/sorority, you should be aware of the regulations governing the conduct of all students and student organizations at the University of Oklahoma. All University of Oklahoma students and student organizations must abide by the *University of Oklahoma Student Rights and Responsibilities Code* and all University policies. Fraternities and sororities recognize the importance of the sections pertaining to the alcohol and hazing policy in addition to the Oklahoma State Statutes (Title 21 § 1190), and, your fraternity/sorority inter/national policies. By signing below, I verify that I have read these before mentioned applicable documents. I understand that I am required to report any violation of these regulations to Student Life.

☐ I understand and agree to the above statements.

TALENT RELEASE

For the consideration received, including but not limited to publicity, the adequacy of which is hereby acknowledged, I hereby grant to the Board of Regents of the University of Oklahoma, their successors and assigns, and those acting under their permission, or upon their authority, or those by whom they are commissioned: (1) The unqualified right and permission to reproduce, copyright, publish, circulate and otherwise use photographs and/or motion pictures of me, and voice reproduction, whether taken in a studio or elsewhere, in black-and white or in colors, alone or in conjunction with other persons or characters, real or imaginary, in any part of the world including posting on social media sites such as YouTube. I hereby waive the opportunity or right to inspect or approve the finished photographs, films or tapes or the use to which it may be put or the copy or illustrations used in connection therewith. This authorization covers composite, stunt, comic, freak or any unusual photograph and/or motion picture, or voice reproduction, caused by optical illusion, distortion, alteration or made by retouching or by using parts of several photographs or by any other method. All such use shall be for the purpose of promoting, supporting or otherwise furthering the mission of the University.(2) All my right, title and interest in and to all negatives, prints, tapes, and reproductions thereof, and I do hereby release the aforesaid parties and their successors and assigns, if any, from any and all rights, claims, demands, actions or suits which I may or can have against them on account of the use of publication of said photograph and/or motion pictures or tapes. I have read and understood the release and agree to its terms and conditions.

☐ I understand and agree to the above statements.

GREEK FEE

I understand that as a member or new member of the Greek community at OU, I am responsible for paying the $30 semesterly Greek Fee billed to my university Bursar account. To learn more about the Greek Fee, visit link.ou.edu/greek-fee.

☐ I understand and agree to the above statements.

_____ _____
Affiliate Signature Date

The student listed above has been extended to join our chapter at the University of Oklahoma.

_____ _____
Signature and Title of Chapter Officer Date